

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FIGHT FOR TOMORROW			FEC IDENTIFICATION NUMBER ▼ C C00549279		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>		
Full Name of Payee KMAJ 1440 AM			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 31 / 2014		
Mailing Address Cumulus Broadcasting 825 S Kansas Ave			Amount 540.69		
City State Zip Code Topeka KS 66612		Transaction ID : SE.6978 Date of Disbursement or Obligation MM / DD / YYYY 07 / 30 / 2014			
Purpose of Expenditure Advertising Air Time		Category/Type			
Name of Federal Candidate MILTON WOLF			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: KS		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee KMBZ Radio			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 31 / 2014		
Mailing Address 7000 Squibb Rd			Amount 3587.85		
City State Zip Code Mission KS 66202		Transaction ID : SE.6977 Date of Disbursement or Obligation MM / DD / YYYY 07 / 30 / 2014			
Purpose of Expenditure Advertising Air Time		Category/Type			
Name of Federal Candidate MILTON WOLF			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: KS		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			4128.54		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature MATT L MACKOWIAK			Date MM / DD / YYYY 08 / 01 / 2014		

[Electronically Filed]